REMARKS

Applicants submit this Response to the Non-final Office Action dated October 10, 2008. Claims 1 to 58 are pending and rejected. Claims 18 and 33 have been amended. The amendments do not add new matter. Support for these amendments is found at least at page 5, lines 13 to 21 of the originally filed application. Applicants believe that no fee is due in connection with this case. However, please charge Deposit Account No. 02-1818 for any amounts that may be due.

In the Office Action, Claims 1 to 58 were rejected under 35 U.S.C. §103(a) as being unpatentable over US Patent No. 6,406,426 to Reuss et al. ("Reuss") in view of US Patent No. 6,641,533 to Causey, III et al. ("Causey"). Applicants respectfully traverse this rejection for at least the reasons provided below.

Reuss fails to disclose or suggest software installed on a wireless remote device having a time-out output, wherein the time-out output indicates loss of a wireless communication link as required, in part, by independent Claims 1 and 44. Reuss further fails to disclose or suggest generating a time-out output remotely from the medication treatment application device when the wireless communication link is lost as required, in part, by amended independent Claim 18. Reuss further fails to disclose or suggest providing for generating a time-out output by polling or monitoring the communication link to actively test its integrity, and generating the time-out output when the wireless communication link is lost as required, in part, by amended independent Claim 33. The Office Action admits the same. See, Office Action, page 2, lines 15 to 16.

Applicants submit that Causey fails to remedy the deficiencies of Reuss. The Office Action cites column 2, lines 50 to 55 and column 18, lines 19 to 37 as evidence that Causey discloses the application of various software installed on a wireless remote device. The Office Action further cites column 11, line 65 to column 12, line 4 as evidence that Causey discloses a wireless remote device having a time-out output, wherein the time-out output indicates loss of a wireless communication link. Applicants respectfully disagree.

Causey teaches a remote RF programmer 1012, taken in the Office Action as the wireless remote device of the present claims, which enables performance of basic programming steps on an external infusion device 1010 without requiring use of the keyboard 1024 on the external

infusion device 1010 or looking at the LCD (Liquid Crystal Display) 1028 screen. See, Causey, column 9, lines 60 to 65. The data transfer capabilities between the RF programmer 1012 and a transmitter/receiver 1026 of the external infusion device 1010 can be two-way. See, Causey, column 10, lines 41 to 44. The RF programmer 1012 may also have the ability to receive data and information from the external infusion device 1010 and/or a glucose monitoring device, and the ability to relay the information to another medical device, external infusion device 1010, glucose monitor device, PC, laptop, Communication-Station, or the like. See, Causey, column 10, lines 45 to 51. The RF programmer 1012 may transmit data to other devices or include the capability to receive data or instructions. See, Causey, column 9, lines 60 to 64; column 10, lines 41 to 45; and column 11, lines 38 to 45.

The external infusion device 1010 of Causey includes a receiver to receive commands from the RF programmer 1012. See, Causey, column 11, lines 48 to 51. Regarding the external infusion device 1010 and associated receiver, Causey states, "[o]nce the receiver recognizes that there is a valid RF programmer 1012 sending a message to the external infusion device 1010 (i.e., with this device 1010's unique code), the receiver will remain in an active mode until a complete sequence of commands has been received, or until the receiver times out due to a lack of RF communications from the RF programmer 1012" (emphasis added). See, Causey, column 11, line 65 to column 12, line 4. Causey clearly indicates that the receiver of the external infusion device 1010 is the device that generates the time-out output due to a lack of communication from the RF programmer 1012.

By contrast, the present claims require generating a time-out output remote from the medication treatment device (e.g. by a wireless remote device), not by the external infusion device 1010, to test the integrity of a communication link. A time-out is an output generated by a module or application for indicating that the module or application has waited a certain amount of time for input, but has not received it. See, specification, page 5, lines 23 to 26. For example, the module or application installed on the digital assistant 118 (wireless remote device) can test the integrity of the communication link by polling, or monitoring communication from, the central system 108, or the access point 114. If a response is not received from the central system 108 or the access point 114, the module or application installed on the digital assistant 118 generates a time-out that results in audible tones and/or notification on the visual display 188a that communication with the central computer system 108 has been lost. The notification on the

Appl. No. 10/659,760 Response to October 10, 2008 Office Action

visual display 188a can be, for example, the activation of an information pop-up window stating that communication link is lost, or the changing of an active icon display on the toolbar of the display. See, specification, page 5, lines 13 to 23.

Therefore, because Causey teaches generating a time-out output from an infusion device rather than from a device remote from the infusion device as required by the present claims, Applicants respectfully submit that the cited references are deficient with respect to rejected Claims 1 to 58.

For the foregoing reasons, Applicants respectfully submit that the present application is in condition for allowance and earnestly solicit reconsideration of same.

Respectfully submitted,

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